



Chesterfield County Preservation Committee

9901 Lori Road, Room 203
P.O. Box 40
Chesterfield, VA 23832-0040

Telephone: (804) 796-7192
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HISTORIC DISTRICT & LANDMARK NOMINATION FORM

1 NAME OF PROPERTY

Historic Name: _____

Common Name: _____

Number of Acres to be Designated: _____ ☐ Structure Only

2 LOCATION

Street Address: _____

Legal Description and/or Deed Book Information: _____

In the Vicinity of: _____

3 CLASSIFICATION

<u>Category</u>	<u>Ownership</u>	<u>Status</u>	<u>Accessible</u>
<input type="checkbox"/> District	<input type="checkbox"/> Public	<input type="checkbox"/> Occupied	<input type="checkbox"/> Yes: Restricted
<input type="checkbox"/> Building(s)	<input type="checkbox"/> Private	<input type="checkbox"/> Unoccupied	<input type="checkbox"/> Yes: Unrestricted
<input type="checkbox"/> Site			<input type="checkbox"/> No

<u>Use</u>			
<input type="checkbox"/> Agricultural	<input type="checkbox"/> Industry	<input type="checkbox"/> Park	<input type="checkbox"/> Museum
<input type="checkbox"/> Educational	<input type="checkbox"/> Scientific	<input type="checkbox"/> Government	<input type="checkbox"/> Religious
<input type="checkbox"/> Entertainment	<input type="checkbox"/> Commercial	<input type="checkbox"/> Military	<input type="checkbox"/> Residence
<input type="checkbox"/> Other:	_____		

4 OWNER OF PROPERTY

Name: _____

Address: _____

City/State/Zip: _____ Phone: _____

5 REPRESENTATION IN EXISTING SURVEYS

Is the property listed on the National Register of Historic Places? ☐ Yes ☐ No

Is the property listed on the Virginia Landmarks Register? ☐ Yes ☐ No

Has the property been surveyed, studied or identified by the Division of Historic Landmarks?

☐ Yes ☐ No

6 DESCRIPTION

Date of Construction: _____

General Condition: ☐ Excellent ☐ Good ☐ Fair ☐ Deteriorated ☐ Ruinous

Modifications to Structure/Site: ☐ Unaltered ☐ Altered ☐ Original Site ☐ Moved

Date Moved: _____

Describe present and original (if known) physical appearance: _____

7 SIGNIFICANCE

Historical Significance: _____

Architectural Significance: _____

8 MAJOR BIBLIOGRAPHICAL REFERENCES

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____
- 7 _____

9 ATTACHMENTS (include with application form)

- ☐ Photographs ☐ Appropriate Drawings ☐ Other Relevant Documentation
- ☐ Site Plans ☐ Maps/Surveys

10 NOMINATION BY

Name: _____

Organization: _____

Address: _____

City/State/Zip: _____

Phone: _____ (home) _____ (work)

<p>_____ Signature of Applicant</p>	<p>_____ Date</p>
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If you have any questions regarding this form, please call (804) 796-7192. Mail completed form to:

Director of Planning
Chesterfield County
P.O. Box 40
Chesterfield, VA 23832-0040